

09/446370

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>AD</i>	<i>45</i>	<i>4/9/00</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>C.S.W.</i>		<i>05 MAR. 2001</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 (Through numeral) ... Canceled A Appeal
 - Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
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Claim	Final	Original	Date
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet h r

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